

United States Bankruptcy Court
Middle District of Pennsylvania

In re:
Michael Alan Dotson
Debtor

Case No. 21-02228-HWV
Chapter 13

CERTIFICATE OF NOTICE

District/off: 0314-1
Date Rcvd: Nov 18, 2021

User: AutoDocke
Form ID: pdf002

Page 1 of 2
Total Noticed: 24

The following symbols are used throughout this certificate:

Symbol	Definition
+	Addresses marked '+' were corrected by inserting the ZIP, adding the last four digits to complete the zip +4, or replacing an incorrect ZIP. USPS regulations require that automation-compatible mail display the correct ZIP.
++	Addresses marked '++' were redirected to the recipient's preferred mailing address pursuant to 11 U.S.C. § 342(f)/Fed. R. Bank. P. 2002(g)(4).

Notice by first class mail was sent to the following persons/entities by the Bankruptcy Noticing Center on Nov 20, 2021:

Recip ID	Recipient Name and Address
db	+ Michael Alan Dotson, 107 Vegas Drive, Hanover, PA 17331-9799
5440686	+ Dr. J Garabedian, 310 Stock St #3,, Hanover, PA 17331-2276
5440687	+ First National Bank, Attn: Bankruptcy, Po Box 3128, Omaha, NE 68103-0128
5440688	+ H Imteyaz, 1850 Normandie Drive, York, PA 17408-1534
5440689	+ Hanover Cardiology, Dr. C Goodbrod, 310 Stock Street, Suite 3, Hanover, PA 17331-2276
5440690	+ M Bari, 250 Fame Ave Suite 206A, Hanover, PA 17331-1587
5440692	+ P Arora, 310 Stock St Suite 3, Hanover, PA 17331-2276
5443907	++ PERI GARITE, ATTN CARD WORKS, 101 CROSSWAYS PARK DR W, WOODBURY NY 11797-2020 address filed with court., First National Bank of Omaha, 1620 Dodge Street, Stop Code 3129, Omaha, Nebraska 68197
5440693	+ Pinnacle Health, P.O. Box 826813, Philadelphia, PA 19182-6813
5440694	+ Quantum Imaging & Therapeutic Assoc, 629-D Lowther Road, Lewisberry, PA 17339-9527
5440696	+ Select PT PA, 785 Cherry Tree Ct, Hanover, PA 17331-7902
5440695	+ Select Portfolio Servicing, Inc, Attn: Bankruptcy, Po Box 65250, Salt Lake City, UT 84165-0250
5440697	+ Sofi Lending Corp, 375 Healdsburg Avenue, Suite 280, Healdsburg, CA 95448-4151
5440699	+ T Prowell, 2201 Brunswick Drive, Suite 2300, Hanover, PA 17331-8350

TOTAL: 14

Notice by electronic transmission was sent to the following persons/entities by the Bankruptcy Noticing Center.

Electronic transmission includes sending notices via email (Email/text and Email/PDF), and electronic data interchange (EDI). Electronic transmission is in Eastern Standard Time.

Recip ID	Notice Type: Email Address	Date/Time	Recipient Name and Address
cr	+ Email/PDF: rmscedi@recoverycorp.com	Nov 18 2021 18:46:25	PRA Receivables Management, LLC, PO Box 41021, Norfolk, VA 23541-1021
5440683	+ Email/PDF: Citi.BNC.Correspondence@citi.com	Nov 18 2021 18:46:27	Citibank, Citicorp Credit Svcs/Centralized Bk dept, Po Box 790034, St Louis, MO 63179-0034
5440684	+ Email/PDF: Citi.BNC.Correspondence@citi.com	Nov 18 2021 18:46:34	Citibank/Shell Oil, Citicorp Credit Svcs/Centralized Bk dept, Po Box 790034, St Louis, MO 63179-0034
5442187	+ Email/Text: mrdiscen@discover.com	Nov 18 2021 18:43:00	Discover Bank, Discover Products Inc, PO Box 3025, New Albany Ohio 43054-3025
5440685	+ Email/Text: mrdiscen@discover.com	Nov 18 2021 18:43:00	Discover Financial, Attn: Bankruptcy, Po Box 3025, New Albany, OH 43054-3025
5440691	+ Email/Text: unger@members1st.org	Nov 18 2021 18:43:00	Members 1st, 5000 Louise Drive, Mechanicsburg, PA 17055-4899
5444904	+ Email/Text: bankruptcydpt@mcmcg.com	Nov 18 2021 18:43:00	Midland Credit Management, Inc., PO Box 2037, Warren, MI 48090-2037
5441120	+ Email/PDF: gecsedl@recoverycorp.com	Nov 18 2021 18:46:24	Synchrony Bank, c/o PRA Receivables Management, LLC, PO Box 41021, Norfolk, VA 23541-1021
5440698	+ Email/PDF: gecsedl@recoverycorp.com	Nov 18 2021 18:46:24	Synchrony/PayPal Credit, Attn: Bankruptcy, Po Box 965060, Orlando, FL 32896-5060
5440700	+ Email/Text: lyonsbe2@upmc.edu	Nov 18 2021 18:43:00	UPMC Hanover, 300 Highland Avenue, Hanover,

PA 17331-2297

TOTAL: 10

BYPASSED RECIPIENTS

The following addresses were not sent this bankruptcy notice due to an undeliverable address, *duplicate of an address listed above, *P duplicate of a preferred address, or ## out of date forwarding orders with USPS.

NONE

NOTICE CERTIFICATION

I, Joseph Speetjens, declare under the penalty of perjury that I have sent the attached document to the above listed entities in the manner shown, and prepared the Certificate of Notice and that it is true and correct to the best of my information and belief.

Meeting of Creditor Notices only (Official Form 309): Pursuant to Fed .R. Bank. P.2002(a)(1), a notice containing the complete Social Security Number (SSN) of the debtor(s) was furnished to all parties listed. This official court copy contains the redacted SSN as required by the bankruptcy rules and the Judiciary's privacy policies.

Date: Nov 20, 2021

Signature: /s/Joseph Speetjens

CM/ECF NOTICE OF ELECTRONIC FILING

The following persons/entities were sent notice through the court's CM/ECF electronic mail (Email) system on November 18, 2021 at the address(es) listed below:

Name	Email Address
Jack N Zaharopoulos (Trustee)	TWecf@pamd13trustee.com
Nicholas G. Platt	on behalf of Debtor 1 Michael Alan Dotson ngp@mooney4law.com plattnr61895@notify.bestcase.com
Rebecca Ann Solarz	on behalf of Creditor CSMC 2021-JR1 Trust bkgroup@kmlawgroup.com
United States Trustee	ustpregion03.ha.ecf@usdoj.gov

TOTAL: 4

LOCAL BANKRUPTCY FORM 3015-1**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE MIDDLE DISTRICT OF PENNSYLVANIA**IN RE:
Michael Alan DotsonCHAPTER 13
CASE NO. **1:21-bk-02228**

☒ ORIGINAL PLAN
☐ AMENDED PLAN (Indicate 1st, 2nd, 3rd, etc.)
☐ Number of Motions to Avoid Liens
☐ Number of Motions to Value Collateral

CHAPTER 13 PLAN**NOTICES**

Debtors must check one box on each line to state whether or not the plan includes each of the following items. If an item is checked as "Not Included" or if both boxes are checked or if neither box is checked, the provision will be ineffective if set out later in the plan.

- | | | | |
|---|---|-----------------------------------|--|
| 1 | The plan contains nonstandard provisions, set out in § 9, which are not included in the standard plan as approved by the U.S. Bankruptcy Court for the Middle District of Pennsylvania. | <input type="checkbox"/> Included | <input checked="" type="checkbox"/> Not Included |
| 2 | The plan contains a limit on the amount of a secured claim, set out in § 2.E, which may result in a partial payment or no payment at all to the secured creditor. | <input type="checkbox"/> Included | <input checked="" type="checkbox"/> Not Included |
| 3 | The plan avoids a judicial lien or nonpossessory, nonpurchase-money security interest, set out in § 2.G. | <input type="checkbox"/> Included | <input checked="" type="checkbox"/> Not Included |

YOUR RIGHTS WILL BE AFFECTED

READ THIS PLAN CAREFULLY. If you oppose any provision of this plan, you must file a timely written objection. This plan may be confirmed and become binding on you without further notice or hearing unless a written objection is filed before the deadline stated on the Notice issued in connection with the filing of the plan.

1. PLAN FUNDING AND LENGTH OF PLAN.**A. Plan Payments From Future Income**

1. To date, the Debtor paid \$__ (enter \$0 if no payments have been made to the Trustee to date). Debtor shall pay to the Trustee for the remaining term of the plan the following payments. If applicable, in addition to monthly plan payments, Debtor shall make conduit payments through the Trustee as set forth below. The total base plan is **\$9,300.00**, plus other payments and property stated in § 1B below:

Start mm/yy	End mm/yy	Plan Payment	Estimated Conduit Payment	Total Monthly Payment	Total Payment Over Plan Tier
11/21	10/26	155.00	0.00	155.00	9,300.00
				Total Payments:	\$9,300.00

2. If the plan provides for conduit mortgage payments, and the mortgagee notifies the Trustee that a different payment is due, the Trustee shall notify the Debtor and any attorney for the Debtor, in writing, to adjust the conduit payments and the plan funding. Debtor must pay all post-petition mortgage payments that come due before the initiation of conduit mortgage payments.

3. Debtor shall ensure that any wage attachments are adjusted when necessary to conform to the terms of the plan.
4. CHECK ONE: ☒ Debtor is at or under median income. *If this line is checked, the rest of § 1.A.4 need not be completed or reproduced.*

B. Additional Plan Funding From Liquidation of Assets/Other

1. The Debtor estimates that the liquidation value of this estate is **\$2,771.25**. (Liquidation value is calculated as the value of all non-exempt assets after the deduction of valid liens and encumbrances and before the deduction of Trustee fees and priority claims.)

Check one of the following two lines.

☒ No assets will be liquidated. *If this line is checked, the rest of § 1.B.2 and complete § 1.B.3 if applicable*

☐ Certain assets will be liquidated as follows:

2. In addition to the above specified plan payments, Debtor shall dedicate to the plan proceeds in the estimated amount of \$__ from the sale of property known and designated as __. All sales shall be completed by __. If the property does not sell by the date specified, then the disposition of the property shall be as follows:

3. Other payments from any source(s) (describe specifically) shall be paid to the Trustee as follows:

2. SECURED CLAIMS.

A. Pre-Confirmation Distributions. Check one.

☒ None. *If "None" is checked, the rest of § 2.A need not be completed or reproduced.*

B. Mortgages (Including Claims Secured by Debtor's Principal Residence) and Other Direct Payments by Debtor. Check one.

☐ None. *If "None" is checked, the rest of § 2.B need not be completed or reproduced.*

☒ Payments will be made by the Debtor directly to the creditor according to the original contract terms, and without modification of those terms unless otherwise agreed to by the contracting parties. All liens survive the plan if not avoided or paid in full under the plan.

Name of Creditor	Description of Collateral	Last Four Digits of Account Number
Select Portfolio Servicing, Inc	107 Vegas Drive HANOVER, PA 17331 Residence: single family home	3971

C. Arrears (Including, but not limited to, claims secured by Debtor's principal residence). Check one.

☒ None. *If "None" is checked, the rest of § 2.C need not be completed or reproduced.*

D. Other secured claims (conduit payments and claims for which a § 506 valuation is not applicable, etc.)

☒ None. *If "None" is checked, the rest of § 2.D need not be completed or reproduced.*

E. Secured claims for which a § 506 valuation is applicable. Check one.

☒ None. *If "None" is checked, the rest of § 2.E need not be completed or reproduced.*

F. Surrender of Collateral. Check one.

☐ None. If "None" is checked, the rest of § 2.F need not be completed or reproduced.

G. Lien Avoidance. Do not use for mortgages or for statutory liens, such as tax liens. Check one.

☐ None. If "None" is checked, the rest of § 2.G need not be completed or reproduced.

3. **PRIORITY CLAIMS.**

A. Administrative Claims

1. Trustee's Fees. Percentage fees payable to the Trustee will be paid at the rate fixed by the United States Trustee.

2. Attorney's fees. Complete only one of the following options:

- a. In addition to the retainer of \$ 94.00 already paid by the Debtor, the amount of \$ 4,406.00 in the plan. This represents the unpaid balance of the presumptively reasonable fee specified in L.B.R. 2016-2(c); or
- b. \$ _____ per hour, with the hourly rate to be adjusted in accordance with the terms of the written fee agreement between the Debtor and the attorney. Payment of such lodestar compensation shall require a separate fee application with the compensation approved by the Court pursuant to L.B.R. 2016-2(b).

3. Other. Other administrative claims not included in §§ 3.A.1 or 3.A.2 above.

Check one of the following two lines.

☐ None. If "None" is checked, the rest of § 3.A.3 need not be completed or reproduced.

B. Priority Claims (including, certain Domestic Support Obligations)

☐ None. If "None" is checked, the rest of § 3.B need not be completed or reproduced.

C. Domestic Support Obligations assigned to or owed to a governmental unit under 11 U.S.C. §507(a)(1)(B). Check one of the following two lines.

☐ None. If "None" is checked, the rest of § 3.C need not be completed or reproduced.

4. **UNSECURED CLAIMS**

A. Claims of Unsecured Nonpriority Creditors Specially Classified.

Check one of the following two lines.

☐ None. If "None" is checked, the rest of § 4.A need not be completed or reproduced.

☐ To the extent that funds are available, the allowed amount of the following unsecured claims, such as co-signed unsecured debts, will be paid before other, unclassified, unsecured claims. The claim shall be paid interest at the rate stated below. If no rate is stated, the interest rate set forth in the proof of claim shall apply.

Name of Creditor	Reason for Special Classification	Estimated Amount of Claim	Interest Rate	Estimated Total Payment
Members 1st	Protect Cosigned Son	\$3,553.00	0%	\$3,553.00

B. Remaining allowed unsecured claims will receive a pro-rata distribution of funds remaining after payment of other classes.

5. **EXECUTORY CONTRACTS AND UNEXPIRED LEASES.** *Check one of the following two lines.*

■ None. If "None" is checked, the rest of § 5 need not be completed or reproduced.

6. VESTING OF PROPERTY OF THE ESTATE.

Property of the estate will vest in the Debtor upon

Check the applicable line:

- ☐ plan confirmation.
☐ entry of discharge.
☒ closing of case.

7. DISCHARGE: (Check one)

- ☒ The debtor will seek a discharge pursuant to § 1328(a).
☐ The debtor is not eligible for a discharge because the debtor has previously received a discharge described in § 1328(f).

8. ORDER OF DISTRIBUTION:

If a pre-petition creditor files a secured, priority or specially classified claim after the bar date, the Trustee will treat the claim as allowed, subject to objection by the Debtor.

Payments from the plan will be made by the Trustee in the following order:

Level 1: _____
 Level 2: _____
 Level 3: _____
 Level 4: _____
 Level 5: _____
 Level 6: _____
 Level 7: _____
 Level 8: _____

If the above Levels are filled in, the rest of § 8 need not be completed or reproduced. If the above Levels are not filled-in, then the order of distribution of plan payments will be determined by the Trustee using the following as a guide:

Level 1: Adequate protection payments.
 Level 2: Debtor's attorney's fees.
 Level 3: Domestic Support Obligations.
 Level 4: Priority claims, pro rata.
 Level 5: Secured claims, pro rata.
 Level 6: Specially classified unsecured claims.
 Level 7: Timely filed general unsecured claims.
 Level 8: Untimely filed general unsecured claims to which the Debtor has not objected.

9. NONSTANDARD PLAN PROVISIONS

Include the additional provisions below or on an attachment. Any nonstandard provision placed elsewhere in the plan is void. (NOTE: The plan and any attachment must be filed as one document, not as a plan and exhibit.)

Dated: **October 7, 2021****/s/ Nicholas G. Platt****Nicholas G. Platt 327239**

Attorney for Debtor

/s/ Michael Alan Dotson**Michael Alan Dotson**

Debtor

By filing this document, the debtor, if not represented by an attorney, or the Attorney for Debtor also certifies that this plan contains no nonstandard provisions other than those set out in § 9.

Case 1:21-bk-02228-HWV Doc 5 Filed 10/13/21 Entered 10/13/21 09:19:42 Desc
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